

MOBILE VENDOR LICENSE APPLICATION FY2021



JULY 1, 2020 TO JUNE 30, 2021

BUSINESS OWNER INFORMATION						
	NAME:					
BUSINESS NAME:						
PHONE NUMBER:						
EMAIL:						
ADDRESS:						
CITY, STATE, ZIP:						
DESCRIPTION OF BUSINESS AND GOODS TO BE SOLD:						
AND GOODS	S TO BE SOLD:					
VEHICLE DESCRIPTION						
MAKE:		MODEL				
		MODEL:				
YEAR:		COLOR:				
TAG#:		VIN:				
DRIVERS						
(IF APPLICABLE):						
APPLICATION REQUIREMENTS						

- \$50 LICENSE FEE (NON-REFUNDABLE)
- PRINCE GEORGE'S COUNTY HEALTH DEPARTMENT DECAL
- PRINCE GEORGE'S COUNTY VENDOR LICENSE

I UNDERSTAND THAT AS A MOBILE VENDOR I MAY NOT:

- OBSTRUCT VEHICULAR OR PEDESTRIAN TRAFFIC
- ENTER UPON SIDEWALKS OR FOOT PATHS
- ENTER ANY ZONING DISTRICT EXCEPT AS PERMITTED
- ENTER UPON ANY NO PARKING AREA OR LOADING ZONE
- STOP OR STAND ANY VEHICLE TO INTERFERE WITH THE NORMAL FLOW OF TRAFFIC
- BLOCK DRIVEWAYS OR DOUBLE PARK ON ROADWAY
- VIOLATE ANY VEHICLE LAW

APPLICATION WILL BE RETURNED IF THIS SECTION IS NOT COMPLETED

I hereby attest under penalty of perjury that this application is true and correct to the best of my knowledge and and that the Mobile Vendor business and vehicle is in compliance with all applicable Federal, State, and local laws and regulations. Further, that I consent to the inspection and requirements of the Town Code. I understand that any false or misleading information provided in this application may be grounds for denial or revocation of this license.

APPLICANT NAME (PRINT):	DATE:	
SIGNATURE:	TITLE:	

TOWN-ISSUED MOBILE VENDOR DECAL MUST BE CLEARLY DISPLAYED

OFFICE USE ONLY
MOBILE VENDOR LICENSE #